ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | | | 07/22/00 |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | 65455 | 9/7 |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

## INDEX OF CLAIMS

| | | | | | |
|---|---|---|---|---|---|
| ✔ | ................................ Rejected | | N | ................................ Non-elected |
| = | ................................ Allowed | | I | ................................ Interference |
| — | (Through numeral)... Canceled | | A | ................................ Appeal |
| ÷ | ................................ Restricted | | O | ................................ Objected |



If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)